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WILTSHIRE COUNTY COUNCIL.

Annual Report

OF THE

Medical Officer of Health

for the Year 1944.

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PUBLIC HEALTH DEPARTMENT,
COUNTY HALL,
TROWBRIDGE,

July, 1945.

MY LORDS, LADIES AND GENTLEMEN,

I have the honour to submit my twenty-sixth Annual Report on the health of the County of Wiltshire.

Apart from tuberculosis, the health statistics now presented for 1944 are more satisfactory than the most optimistic could have hoped for after five years of war. But now the County, like the Country generally, faces a serious threat to its health services. The shortage of staff, particularly of Nursing and Domestic staff, is increasingly reducing the amount of treatment that can be given, and, although this effect has been felt earlier and more acutely in tuberculous work, it is spreading to all hospital work.

The Government's suggestions for a National Health Service, first published in February, 1944, have led, amongst many other developments, to the tentative grouping of the larger Authorities, including Wiltshire, which form a natural region around Bristol as a University Centre. Many meetings of representatives have been held and common problems have been discussed with great advantage. It seems probable that from this beginning will emerge a Joint Planning Authority such as the Ministry desire to establish for functions beyond the power of even the largest single Authority.

Having been associated in Wiltshire for more than a quarter of a century with the most active period of national health development in history, I now take my leave on the eve of a far more important era that is bound to affect every part of the County Health Service.

I have the honour to be,

Your obedient Servant,

CLAUDE E. TANGYE.

POPULATION.

The Registrar-General's estimate for 1944 343,630

This shows an increase of over 25,000 on the corresponding estimate for 1939, but a decrease of some 2,000 on the previous year, due to the return to their homes of evacuees.

BIRTHS AND DEATHS.

	TOTAL.		RATE.	
	1944	1943	1944	1943
			(per 1000 of population)	
Live Births	6990	6104	20.34	17.65
Deaths	3851	3871	11.21	11.19
Deaths from :—			(per 1000 births)	
Puerperal Sepsis	4	2	0.56	0.32
Other Puerperal Causes	10	9	1.39	1.43
TOTAL	14	11	1.95	1.75
Deaths of Infants under one year of age	290	270	(per 1000 live births)	
Deaths from Cancer (all ages)	578	564	41.49	44.23
Deaths from certain Infectious Diseases :—				
Scarlet Fever	2	—		
Diphtheria	5	2		
Typhoid and Paratyphoid Fever	—	—		
Cerebro-Spinal Fever	2	4		
Infantile Paralysis	2	1		
Acute Encephalitis Lethargica	2	1		
Phthisis	99	95		
Other Tuberculosis	26	24		

The live birth-rate rose to 20.34, which compares with the national rate of 17.6. The 1944 rate is the highest since 1920.

The death-rate rose slightly, although the number of deaths was actually less than during the previous year. The explanation of this apparent anomaly, of course, lies in the decrease in population since 1943. The rate, 11.21, is considerably lower than the national rate, 11.6.

The maternal mortality rate, 1.95, although higher than that for the previous year, differs very little from the national rate of 1.93.

The infant mortality rate fell from 44.23 in 1943 to 41.49 and remains much lower than the national rate of 46.

The comparative table below includes the three diseases which give rise to most anxiety during present conditions, and refers to the whole County area, including Swindon and Salisbury. None of the five patients who died from diphtheria was amongst the many thousands who had been immunised in the County area.

Disease.	1938	1939	1940	1941	1942	1943	1944
Deaths from Diphtheria	7	13	37	19	2	2	5
„ Cerebro-spinal Fever ...	5	3	23	18	10	4	2
„ Tuberculosis :—							
Phthisis	111	110	109	134	107	95	99
Other	22	19	28	49	34	24	26

ACUTE INFECTIOUS DISEASES.

No infectious disease threatened at any time in the year to assume epidemic proportions. The following figures show the incidence of the more important infectious diseases amongst civilians during 1944 :—

Disease.	Total notifications during :—					
	1939	1940	1941	1942	1943	1944
Smallpox	—	—	—	3	—	—
Scarlet Fever	449	1180	711	543	658	640
Diphtheria	154	501	314	70	74	105
Enteric Fever (including Paratyphoid)	8	2	31	5	6	—
Puerperal Pyrexia	86	86	120	98	67	64
Cerebro-spinal Fever	10	240	100	60	28	22
Infantile Paralysis	9	4	14	9	9	1
Acute Encephalitis Lethargica	1	4	2	6	2	—
Ophthalmia Neonatorum	18	18	29	25	20	22

There was no major change in the figures for last year compared with those for the previous year, although the total of diphtheria notifications was a little higher than the exceptionally low figures of the preceding two years. However, of the 105 cases recorded only 60 were notified in the area of the County in which the County Council has assumed responsibility for diphtheria immunisation and of these 60 only four were children who had been immunised under our scheme, which is still being prosecuted vigorously.

It is very satisfactory to be able to record that the County was entirely free during 1944 not only from smallpox but also from enteric fever, which has been occurring sporadically for some time in other parts of the Country.

Cerebro-spinal fever, which under war conditions might have been expected to assume serious proportions, continues to diminish, only 22 cases being notified.

Infantile paralysis, the source of such serious crippling, provided only one new case during 1944, and there was no notification of acute encephalitis lethargica, which in the past has been common.

The very slight increase in notifications of ophthalmia neonatorum need not be regarded as unsatisfactory in view of the much larger increase which might have been expected as a result of war conditions. With the latest forms of treatment, even under war conditions this disease no longer presents such anxious problems as in the past.

HOSPITALS.

St. Margaret's Hospital, Swindon, was taken over exclusively for war casualties from before D-day until the end of the year. Since then this hospital has begun again to assume its increasingly important position for the civil population.

Tower House Hospital, Salisbury, undertook more service for County cases during the year and at present is indispensable for Ear, Nose and Throat Work.

MIDWIFERY AND MATERNITY SERVICES.

There was no break in the midwifery service, either in the districts or in the Maternity Homes, during the year, though the shortage of midwives remained acute and caused much anxiety. Our Emergency Midwifery Staff in theory consisting of three midwives continues to consist of one only, but the degree of co-operation achieved between the nurses of the various District Associations in the County, co-ordinated under the County Nursing Association, has resulted in local solutions of many of the emergencies which have arisen.

It is interesting to note that, whereas the total number of cases attended by midwives in the County Council's area including those in the Emergency Unit has risen from 3,889 in 1939 to 5,570 in 1944, the number of midwives in practice in the area has increased by 4 only, and the number of midwives in the districts has actually fallen by the same number.

A change was made in June, 1944, in the arrangements for the routine supervision of midwives, hitherto undertaken by the County whole-time Health Visitors. A whole-time non-medical Supervisor of Midwives, Miss Redwood, was appointed for the County and now undertakes all this work.

Emergency Maternity Homes. The Emergency Maternity Unit, consisting of Maternity Homes at Bradford-on-Avon and Melksham and an Ante-Natal Hostel at the former, totalling 115 beds, has continued its clinical work under Mr. Wilfred Shaw and its function as a Training School.

Although, at the time of writing, the original reasons for evacuation no longer exist; the flow of London mothers to the Unit for confinement remains undiminished and indeed exceeds that during some of the lull periods of the war. The reasons no doubt lie, at any rate partly, in the destruction of maternity accommodation in London itself and the closure of other Emergency Units more distant from the Metropolis.

The extraordinary low mortality rate of the Unit again deserves record. Apart from an emergency case suffering from severe cardiac disease and moribund on admission, there has been only one death in some 4,800 cases admitted to the Unit up to the time of writing.

During the year, 1,268 patients were confined in this Unit of whom some 800 were evacuees. The Unit therefore has filled a very important place in providing institutional care for confinement cases in the County, the actual number of beds used for this purpose averaging about 20 throughout the year. It is clear therefore that if this Unit is closed, it must, to the extent of 20 beds at least, be replaced, unless the County scheme for Maternity accommodation is to suffer a very grave set-back.

County Maternity Homes. On 1st April, 1944, the County Council assumed responsibility for the Corsham Maternity Home. The Home is a small one of 13 beds, in adapted premises, but has performed excellent work for many years under a local Voluntary Committee, at whose request the change was made.

The other three Voluntary Hospitals at Salisbury, Trowbridge and Malmesbury with which the County Council has arrangements for the reception of maternity cases, continued their work, and also the Swindon Maternity Home, organised jointly with the Swindon Town Council. These four Institutions, with the Corsham Home, admitted a total of 1,935 cases during the year, including private cases and cases sent by the Swindon and Salisbury Local Authorities.

The number of registered births in Wiltshire during 1944 was 7,172. In addition to the 1,935 cases mentioned above as being admitted to the four County Maternity Homes and 466 to the Emergency Maternity Homes, some 800 were admitted to private Nursing Homes and other hospitals, making a total of over 3,200. It will therefore be seen that about 45% of Wiltshire women were confined in Maternity Homes or Hospitals.

Home-Helps. The Ministry's circulars on the subject of a home-help service during confinements were followed up energetically by contact with the Ministry of Labour locally. Although eventually some half-a-dozen candidates resulted, only one was found suitable. She was engaged for part-time work when required, but her home is in an isolated hamlet and, by the end of the year, there had been no call for her services.

Another suitable woman, however, who lives in a populous rural area, has since been found and engaged in 1945. Her services have already been in considerable demand.

Domestic Helps. Careful attention was also devoted to the Ministry's circular on domestic help during ordinary illness, in spite of the disappointing results of our previous work under the above head. The County Council's willingness to engage domestic helps was communicated to various bodies most likely to help in recruitment, but unfortunately no candidates have come forward.

CHILD WELFARE.

Our health visiting service has been more than ever necessary under war conditions which have produced larger numbers of cases of neglect and more unwanted illegitimate children. The service has not been without temporary interruption, due to shortage of personnel, but there have been no long breaks, and the total number of visits paid was 37,820 compared with 30,904 in 1939.

Much the greater part of the work continues to be undertaken by some 85 nurses of local nursing associations, who combine these duties in most cases with school nursing, but there is a tendency in the larger urban areas for the work to be transferred to the County Council's whole-time Health Visitors, who now number eleven.

The peace-time schemes for the treatment of orthopaedic, ophthalmic and ear, nose and throat defects amongst infants have continued and expanded. The accommodation for children at the Marlborough Convalescent Home, restricted by other war-time demands on the Home, but augmented by a Nursery of 22 cots at Warminster, has been fully occupied almost exclusively by illegitimate and deserted children.

Unmarried Mothers and their Infants. As foreshadowed in my last Report, our accommodation for unmarried mothers and their infants has been extended by the establishment of a Hostel especially for the purpose at Devizes. It has been organised, in premises purchased by the Council, by the Salisbury Diocesan Association for Moral and Spiritual Welfare with which close co-operation has been secured and to which, together with a similar organisation for the diocese in the north of the County, the Council already makes substantial contributions. The Hostel has accommodation for 8 mothers and babies, and 8 expectant mothers or shelter cases, but was not actually opened until 1945. Confinements are not conducted in the Hostel, but are arranged at one of the County Maternity Homes.

Premature Infants. Special equipment for the care of premature infants, including cots, gamgee suits, and suitable feeding apparatus are being obtained for twelve separate centres in the County. This equipment will be immediately available on request from midwives for the care of premature infants in their own homes. Health visitors are, of course, given special instructions in following up all infants whose birth-weight is less than $5\frac{1}{2}$ lbs.

In addition, it is proposed to accept financial responsibility for the care of such infants from Wiltshire in the special accommodation which is to be provided at the Royal United Hospital, Bath.

WAR-TIME DAY NURSERIES.

During the year one of the nine Nurseries which were in operation in 1943 was closed owing to the small attendance.

Attendances are still regular at the other 8 Nurseries but there are vacancies at each one. There was a total attendance of approximately 55,430 making an average daily attendance at each Nursery of nearly 21.

CIVIL NURSING RESERVE.

During the year, 32 applicants for enrolment as Nursing Auxiliaries were accepted as suitable, 28 being officially enrolled after training and 4 falling out during training. This brought the number of Nursing Auxiliaries on the County Register by December to 129 whole-time and 267 part-time. In addition there were, on the register, 55 trained nurses (31 whole-time and 24 part-time) and 21 assistant nurses (12 whole-time and 9 part-time).

Intensive Courses of training have been continued as in the past at various Centres, several having been held in this County at the Devizes and District Hospital.

Towards the end of the year a check was made of the qualifications of all trained and assistant nurses with a view to our enrolment lists being in line with the State registers in respect of trained and assistant nurses.

Every effort has been made to obtain as many recruits as possible for the Reserve but the numbers are disappointingly small. The majority of new members are referred to us by the Appointments Officer of the Ministry of Labour and National Service.

MILK SUPPLY.

Under the Food and Drugs (Milk and Dairies) Bill the responsibility for the purity and safety of the milk supply will pass on an appointed day to be decided by the Government to the Ministry of Agriculture. It therefore seems desirable, even in this brief report, to summarise the present position in the County.

We have a total of 3,200 producers, of whom 854 produce Accredited and 268 Tuberculin Tested milk. In 1944 the Milk Committee revoked 23 licences and granted 172 new ones, 92 Tuberculin Tested and 80 Accredited.

The number of farm inspections made was 5,190, and samples taken 3,548. The staff employed consisted of 3 Dairy Instructors and 3 Local Sanitary Inspectors, under the direct supervision of the County Sanitary Inspector. All veterinary inspections are arranged under the Ministry of Agriculture by their Veterinary Surgeons.

The organisation is thus a large and costly one and the work has been maintained satisfactorily considering war time difficulties. The result is that the standard of cleanliness of milk production has no doubt been kept at a much higher level on licensed than on unlicensed farms.

In connection with the infection of tuberculosis the following is important :—

<i>No. of Milks examined for Tubercle.</i>	<i>Grade of Milk.</i>	<i>No. Positive.</i>	<i>%</i>
531	Non-licensed	21	3.9%
496	Accredited	22	4.4%
165	Tuberculin Tested	1	.6%
8	Pasteurised	—	—
1200		44	3.7%

It will be seen that during the year pasteurised milk alone gave no sample showing living tubercle bacilli. Tuberculin Tested milk was not entirely free from tubercular infection, and Accredited milk was more infected than ordinary unlicensed farm supplies. This position cannot justly be regarded with complacency, or as a satisfactory result from all the effort and expenditure concentrated on the control of the milk supply.

The percentage of 3.7 tuberculous milks of those taken during the year compares with an average percentage of 4.2 during the last twelve years.

TUBERCULOSIS.

Medical Staff. This remained as in 1943 but owing to the heavy pressure of work, efforts were made towards the end of the year for the release from the Army of Dr. D. F. Morgan, Assistant County Medical Officer, who had previously acted as Tuberculosis Officer, whilst Dr. Harper was in the Royal Air Force. These efforts were successful, and Dr. Morgan returned to the service of the County Council early in 1945 and since then has been assisting in the Tuberculosis Scheme, as well as resuming his work as Medical Officer of Health of the Warminster Urban and Warminster and Westbury Rural Districts.

Notifications. The following table shows the number of notifications of new cases, both pulmonary and non-pulmonary, during the years 1938—1944.

NOTIFICATIONS OF NEW CASES.

<i>Year.</i>	<i>Pulmonary.</i>	<i>Non-pulmonary.</i>	<i>Total.</i>
1938	188	105	293
1939	230	125	355
1940	316	120	436
1941	312	121	433
1942	296	117	413
1943	332	136	468
1944	423	122	545

The increase in tuberculosis notifications continues, there being 77 more cases notified in 1944 than in the previous year. The later age groups, particularly those between 25 and 55, again showed an increase, especially amongst male patients. Many of the cases are Wiltshire men discharged from the army and war workers from elsewhere. Most of the latter will leave us again, but the influx of infective cases in already overcrowded homes cannot but leave results which will long be felt in the County.

Deaths. Deaths from tuberculosis showed a very slight increase, as the following table shows :—

DEATHS.

Year.	Pulmonary.	Non-pulmonary.	Total.
1941	134	49	183
1942	107	34	141
1943	95	24	119
1944	99	26	125

The death-rate from tuberculosis for 1944 was 0.36 per 1,000 of the population.

Cases under Supervision The number of cases under supervision at the end to 1944 was 1,123 (929 pulmonary and 194 non-pulmonary) an increase of 94 on the number for the previous year. In the last pre-war year (1938) the number was 667 (426 pulmonary and 241 non-pulmonary).

Dispensary Attendances. The attendances at the dispensaries again showed a very large increase, the total being 7,203, compared with 5,700 in 1943. The attendances in 1938 were 2,474. The increase was due, not only to routine attendances of patients, but to large numbers of National Service candidates referred for reports to Medical Boards, and ex-Service cases referred for special reports by the Ministry of Pensions.

Two sessions weekly are held at Salisbury, Swindon and Trowbridge, one weekly at the Devizes and District Hospital and one monthly at Savernake Hospital. The seven weekly sessions compare with three before the war. Besides this work, Dr. Harper has attended regularly each week at the E.M.S. Hospitals, St. Margaret's, Swindon and Tower House, Salisbury for consultation on service patients.

Institutional Treatment. The distribution of patients who received institutional treatment, during the year is shown in the following table. Pulmonary cases in all stages are admitted to Harnwood Hospital and the two Isolation Hospitals, and are sent thence to Winsley Sanatorium and elsewhere as may be indicated in each case. Kewstoke Hospital has continued to provide invaluable service in the surgical treatment of pulmonary tuberculosis.

Pulmonary Cases.

Institutions.	Men.	Women.	Children.	Total.
Winsley Sanatorium	51	40	1	92
Harnwood Hospital	57	89	4	150
Devizes Isolation Hospital	50	—	—	50
Salisbury Isolation Hospital	35	—	2	37
St. Margaret's Hospital, Swindon	7	4	—	11
Children's Convalescent Home, Marlborough	—	6	—	6
Kewstoke Hospital	7	5	—	12
Preston Hall	4	—	—	4
Douglas House, Bournemouth	2	—	—	2
Papworth Hall	—	1	—	1
Brompton Hospital	—	1	1	2
Royal National Sanatorium, Ventnor	—	—	1	1
Chippenham Isolation Hospital	1	—	—	1
Grosvenor Sanatorium, Ashford	1	—	—	1
St. Martin's Hospital, Bath	1	1	—	2
Holy Cross Sanatorium, Haslemere	—	1	—	1
Tower House, P.A.I., Salisbury	1	—	—	1
TOTALS	217	148	9	374

Non-Pulmonary Cases.

Bath Children's Orthopaedic Hospital	1	6	33	40
Savernake Hospital	11	15	32	58
Beckford Lodge, Warminster	7	6	2	15
Morland Hall	1	—	—	1
Bristol General Hospital	—	2	—	2
Pyrford Orthopaedic Hospital	1	—	—	1
Westbury Hospital	—	2	—	2
Heritage Schools, Chailey	—	—	1	1
Salisbury General Infirmary	—	1	—	1
St. Martin's Hospital, Bath	1	—	—	1
Winford Orthopaedic Hospital	1	—	—	1
Wingfield Orthopaedic Hospital,	1	—	—	1
St. Margaret's Hospital, Swindon	2	3	—	5
Chippenham P.A. Institution	1	—	—	1
Tower House P.A.I., Salisbury	—	3	—	3
Warminster P.A. Institution	—	2	—	2
Radcliffe Infirmary, Oxford	—	1	—	1
TOTALS	27	41	68	136
GRAND TOTALS	244	189	77	510

The number of patients receiving treatment during the year was 510 compared with 494 in the previous year.

Winsley Sanatorium provides 36 pulmonary beds for the County, 21 for men and 15 for women. Harnwood Hospital provides 40 pulmonary beds, 16 for men and 24 for women, with a further ten shelters, six for men and four for women. In addition the County Council has an arrangement with the Devizes Isolation Hospital Committee whereby a ward of 18 beds is available for the reception of pulmonary cases, and with the Salisbury Isolation Hospital Committee for two wards providing 10 beds for pulmonary cases. At present all beds at these two Isolation Hospitals are being used for men.

Pulmonary cases are also admitted to the Kewstoke Hospital, Weston-super-Mare, for highly specialised surgical treatment. Odd cases are treated in various other Institutions, including the Marlborough Children's Convalescent Home, St. Margaret's Hospital, Swindon, and elsewhere as shown in the table. Every reasonable chance of accommodation has been grasped, but the position is very unsatisfactory, and gives rise to continual anxiety. At the end of 1944, 34 pulmonary cases of which 25 were men, were awaiting admission.

One of the greatest difficulties in providing institutional accommodation for patients has been lack of nursing and domestic staff, and at various times admissions have been held up for this reason. This position is going from bad to worse.

The "daily average" number of in-patients during 1944 was 164.7, compared with 149.2 in 1943 and 127.7 in 1942. Pulmonary cases averaged 120.9 daily, and non-pulmonary cases 43.8 daily.

Out-Patient Treatment. This at present is mainly the continuation of artificial pneumothorax and the number of out-patients who received such treatment in 1944 was 110 : of these, 87 attended Winsley Sanatorium, 22 Harnwood Hospital and one by arrangement with the Gloucester County Council at Standish House. They made 1,212 attendances.

The number of cases receiving this treatment increases yearly, and there is an urgent need for the establishment of other centres to enable patients to attend for treatment nearer their homes. Efforts have been made to open a centre at St. Margaret's Hospital, Swindon, to avoid the necessity of Swindon patients travelling to Winsley Sanatorium for their refills, but up to the present it has not been found possible owing to the lack of a radio grapher.

Tuberculosis Ex-Service Cases. About 200 ex-Service men, mainly Wiltshiremen, have been notified to the Council by the Ministry of Health since the war as suffering from tuberculosis, pulmonary and non-pulmonary. The majority of these have been accepted by the Ministry of Pensions as suffering from tuberculosis attributable to or aggravated by war service. Excluding deaths and removals, and cases still under consideration, the number of accepted cases now on the register is 132, compared with 91 at the end of the year 1943.

Payment of Allowances to Tuberculosis Patients. The scheme whereby allowances are payable to certain persons suffering from pulmonary tuberculosis, (authorised by the Ministry of Health in their Memorandum 266T.) was continued during the year. The following summary gives a brief outline of the operation of the scheme since its commencement on the 1st July, 1943, and up to the 31st December, 1944.

Details of applications and Grants.	From 1st July, 1943 to 31st December, 1943.	Year 1944.	From 1st July, 1943 to 31st December, 1944
Number of individual applications received	120	87	207
Number of individual applications granted	73	69	142
Number of individual applications refused	47	18	65
Number of maintenance grants paid	60	63	123
Number of discretionary grants paid	9	1	10
Number of special grants paid :			
Travelling expenses	15	11	26
Pocket money	10	5	15
Domestic help	—	1	1
Number of fuel grants paid	34	52	86
Total cost of grants approximately	£1,420	£5,200	£6,620

At the end of December, 1944, there were 66 individual patients receiving allowances, several of whom were being paid more than one type of grant. The actual nature of the allowances payable was as follows :—

59 Maintenance, 4 Discretionary, 12 Special and 38 Fuel Grants.

The Relieving Officers continued to act as Tuberculosis Investigation Officers, and rendered much valuable help.

It is difficult to assess the real value of the scheme as it has not been in operation for any great length of time. It is known, however, that in many instances patients have been prepared to take up treatment at an earlier date than would have been the case if no financial help had been forthcoming. Many of the patients receiving grants have not yet completed their course of treatment, but it is interesting to record that in 21 instances already patients have resumed full time work.

It would appear that the cost of this scheme in the County is now stabilised between £5,000 and £6,000 annually, but it is assumed that the payment of allowances will cease if and when the new National Social Service proposals come into operation.

General. The greatest legacy of evil left by the war in Wiltshire is the increase in pulmonary tuberculosis. Before the war we felt that we were beginning to reduce the incidence of the disease, but now the cases have more than doubled and the problem has become unmanageable with the resources left us. Never before has the knowledge and experience of effective modern treatment been so available for Wiltshire people suffering from pulmonary tuberculosis. Never before have there been such fatally long waiting lists with attendant tragedies in untreated cases and hope deferred. Until sufficient nursing and domestic staff is secured and ample beds provided, tuberculosis will remain the worst blot on our health administration.

VENEREAL DISEASES.

Clinics are held as follows :—

	<i>Men.</i>	<i>Women.</i>
County Council Clinic, The Halve, Trowbridge	Thursday, 5-6.30 p.m. ...Dr. J. Teeuwen	Tuesday, 5-6.30 p.m. Dr. Jean Murray
County Council Clinic, Fuller Avenue, Corsham	—	Monday, 5-6.30 p.m. Dr. Jean Murray
Devizes and District Hospital	—	Thursday, 5-6.30 p.m. Dr. Jean Murray
General Infirmary (Skin Dept.), Salisbury	Tuesday, 11-30 a.m.— 1 p.m. Friday, 6-7.30 p.m. Dr. J. L. Potts and Dr. J. C. Gordon	Wednesday, 6-7.30 p.m. Saturday, 11.30 a.m.— 1 p.m.
Isolation Hospital, Gorse Hill, ... Swindon	Wednesday 6.30-8 p.m. Friday 6-7.30 p.m. Dr. J. Teeuwen	Monday- 5-6.30 p.m. Friday, 2-3.30 p.m. Dr. J. Teeuwen
Royal United Hospital, Bath ...	Friday, 5 p.m. Saturday, 5 p.m.	Tuesday, 5 p.m. Friday, 2.30 p.m. Dr. R. Waterhouse.

The annual returns from the Treatment Centres showed further increases in the numbers of patients attending compared with the figures for previous years. The total of new civilian patients was 887 compared with 814 in 1943, and of "Service" patients specially referred for report 65 as against 54 in 1943. By far the larger number of these patients was however found on investigation to be suffering from non-venereal conditions, and new cases of actual venereal disease amongst the civilian and "Service" cases combined numbered only 218 compared with 211 in the previous year.

The preponderance of non-venereal cases amongst patients attending the clinics for the first time has been an interesting feature of the statistics during recent years and of the total of new patients for each of the years 1944, 1943, and 1942 the percentages of such cases have been 77.1, 75.7 and 64.9. These figures indicate an increasing willingness to seek expert advice even in cases of doubt, and may, I think, be regarded as encouraging.

The total numbers of patients attending the clinics during the year were 1405 civilian compared with 1097 in 1943 and 194 "Service" compared with 217 in the previous year.

Regulation 33B, which has been in force since the beginning of 1943 permits of legal action being taken in certain circumstances where persons suspected to be suffering from venereal diseases fail to attend at the clinic for examination or to submit to treatment where this is necessary. It was not, however, found necessary to resort to such action in any instance during the year, but each notification of a suspected case is followed up through the medical or health visiting staff and attendance at the clinic was secured in 36 instances where the case would almost certainly otherwise have gone untreated.

The value of this Regulation therefore lies not so much in the provisions for legal action in extreme cases, but in the scope afforded for informal and confidential action in the manner outlined above.

CANCER.

The arrangements for the treatment of cancer were continued throughout the year on the same general lines as described in previous reports. For the greater part of the County the work is centred on the Bristol Royal Hospital, the southern portion only being served by the Royal South Hants and Southampton Hospital. The services afforded by the latter Centre cannot, however, be regarded as adequate and are now under consideration,

Clinics conducted by the Radiotherapists from the respective Centres for follow-up and preliminary consultation are held as under :—

Associated with Bristol Centre.

Bath, Royal United Hospital
Swindon, Victoria Hospital

Every Tuesday, 11 a.m.

Second and fourth Thursday each month
at 11 a.m.

Trowbridge, County Council Clinic,
The Halve

Third Thursday each month, 11.30 a.m.

Associated with Southampton Centre.

Salisbury General Infirmary

First Thursday each month, 11 a.m.

The statistics set out on page 14 give a very brief indication of the extent of the work during the year. Comparison with the figures for 1943 shows that there has been a considerable increase under each of the heads except at the Salisbury Clinic where the numbers of patients and of attendances were fewer than in the previous year. Owing to staffing difficulties at the Southampton Centre, however, the receipt of records in respect of this Clinic has been intermittent and the figures given are probably an under-statement.

Treatment at the Centres falls under two main heads—X-ray and Radium. At each Centre many of the patients requiring X-ray treatment are dealt with as out-patients. At Bristol a dormitory ward is now available for distant patients who are unfit to make frequent journeys to and from the Centre over a period of several weeks, whilst at Southampton, patients in similar circumstances are frequently boarded-out. Radium treatment is invariably given in the in-patient department. At Bristol, however, the arrangements whereby patients needing this treatment were sent to the Kewstoke E.M.S. Hospital have been discontinued, the radium which had been sent there for security reasons during the war having been returned to Bristol so that the treatment can now be given in an annexe to the Royal Hospital.

At one time during the year the waiting list of patients for deep X-ray treatment at Bristol gave rise to serious concern, but the position was improved by the installation of additional plant.

The cost of treatment at each Centre is met by the County Council but patients are asked to contribute towards the expense in accordance with their means. Frequently, however, contributions are available on their behalf from Hospital Contributory Schemes. Help in the payment of patient's travelling expenses is also given when necessary.

The deaths from Cancer were 578 compared with 564 in 1943 and the respective death rates per 1,000 of the population for the two years being 1.7 and 1.6. This rate has shown little variation for many years past.

TREATMENT OF CANCER.

14

	YEAR 1944.				YEAR 1943.					
	Bath.	Salis- bury.	Trow- bridge.	Swindon.	Total	Bath.	Salis- bury	Trow- bridge.	Swindon.	Total
<i>Attendances at Clinics.</i>										
Patients attending during the year	106	62	109	206	483	66	82	97	187	432
Number of above examined for the first time during the year	... 58	48	40	90	236	38	46	47	101	232
Attendances of patients	... 257	175	287	564	1283	122	219	202	359	902
<i>Treatment at Hospital.</i>										
	Southampton.	Bristol.	Total.			Southampton.	Bristol.	Total.		
Recommended for In-patient Treatment	27	146	173			14	95	109		
Recommended for Out-patient Treatment	25	132	157			22	86	108		
Total Recommendations for Treatment	52	278	330			36	181	217		
Treated as In-patients	... 27	117	144			12	86	98		
Treated as Out-patients	... 24	110	134			26	76	102		
Total Patients Treated	... 51	227	278			38	162	200		

RIVER POLLUTION PREVENTION.

The new establishments created during the War in so many parts of the County have led to river pollution in various degrees. These problems have been dealt with in conjunction with the authorities concerned as well as circumstances have permitted, and at the time of writing many of these sources of pollution have completely ceased.

The large disposal plants of the populated areas of the County have, generally speaking, very successfully coped with their added burdens, but here and there pollution has arisen which has not escaped our observation but has not been sufficiently grave to need formal action. The exception, however, to this general rule has been the case of Chippenham where the town sewage has continued to pollute the Avon practically untreated. During the summer very serious complaints arose over a large distance down stream. The need for the installation of the long planned works at Chippenham has been increasingly apparent to everyone and well known to the Ministry of Health. It is much to be hoped that this will now proceed as an urgent matter, as further pollution of the Avon will undoubtedly lead to very serious results.